

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	16900	02-13-02
RESPONSE FORMALITY REVIEW			02/02/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date	Claim	Final	Original	Date	Claim	Final	Original	Date
1				51				101			
2				52				102			
3				53				103			
4				54				104			
5				55				105			
6				56				106			
7				57				107			
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46				96				146			
47				97				147			
48				98				148			
49				99				149			
50				100				150			

If more than 150 claims or 10 actions  
staple additional sheet here

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